Greenwich Animal Control

Adoption Application - Cats

	Date		
Name			
Address City		_	
State Zip Telephone ()			
Do you live in a (circle one): Single family home Duplex	Condo	Apt	Other
If you rent, does your landlord allow cats? Landlord Name Landlord Telephone Are your paralleled?	e () _		
3. Are you employed? Employer Name Employer Telepho	ne ()		
4. Number of children at home ages			
5. Do you presently have a dog? How Many?			
6. Do you presently have a cat? How Many?			
7. Do you have any other animals? What kind?			
8. Are your current pets spayed and neutered?			
9. Do you have a veterinarian? Veterinarian Name Veterinarian Telep	hone ()	
10. Is the cat a gift for someone?			
11. For what purpose are you seeking this cat?			
12. Will you be spaying or neutering your cat?			
13. Will you be declawing your cat?			
14. Will this cat be (circle one): Indoor Outdoor Both			
15. Have you discussed getting a cat with other members of your hous	ehold?	_	
16. In the future, if you need to move, what will you do with your cat? _			
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17. What is your estimated cost of owning a cat for each year? \$			